

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: **Joseph A. Henke et al.**

Filed: **October 2, 2000**

Serial No.: **09/677,729**

Title: **Electro-Mechanical Wireline Anchoring  
System and Method**

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Art Unit: **3672**

Examiner: **Matthew J. Smith**

Docket No. **COR-1042-US**

**SUBMISSION OF FORMAL DRAWINGS**

Mail Stop: **ISSUE FEE**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Attn: **Official Draftsman**

Dear Sir:

In accordance with the Notice of Allowability mailed February 14, 2005, Applicants herewith submit twenty-one (21) sheets of formal drawings in the above-identified application.

Respectfully submitted,

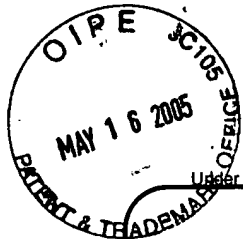
Date: **May 16, 2005**

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Gretchen King



PTO/SB/21 (09-04)

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FORM**

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Total Number of Pages in This Submission

**25**

Application Number

**09/677,729**

Filing Date

**October 2, 2000**

First Named Inventor

**Joseph A. Henke**

Art Unit

**3672**

Examiner Name

**Matthew J. Smith**

Attorney Docket Number

**COR-1042-US****ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	1. Transmittal Issue Fee
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	2. Transmittal Formal Drawings
	<input type="checkbox"/> Landscape Table on CD	3. Check No. 13397
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<input type="checkbox"/> Reply to Missing Parts/Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

**The Commissioner is hereby authorized to charge any additional fees or credit any overpayment to Deposit Account No. 13-0010 (COR-1042-US).****SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	<b>Madan, Mossman &amp; Sriram, P.C.</b>		
Signature			
Printed name	<b>Chandran D. Kumar</b>		
Date	<b>May 16, 2005</b>	Reg. No.	<b>48,679</b>

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Typed or printed name	<b>Gretchen King</b>	Date	<b>May 16, 2005</b>

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